

## PEER REVIEW AGREEMENT FORM

**Name:** \_\_\_\_\_

**School:** \_\_\_\_\_

**District:** \_\_\_\_\_

**Title of Model Unit:** \_\_\_\_\_

**Grade Level(s):** \_\_\_\_\_

\*In order to complete this form and to capture correspondence, simply cut and paste all comments.

<b>DESIGNER</b>	<b>PEER REVIEW COACH COMMENTS (This should be a Narrative providing specific Feedback and Guidance to the Designer)</b>	<b>PEER REVIEW COACH</b>
Date Submitted:		Date Submitted:
Cover Sheet is present and completed? ___ Yes ___ No		Cover Sheet is present and completed? ___ Yes ___ No
Appropriate Delaware Model Unit template is used for this Model Unit? ___ Yes ___ No		Appropriate Delaware Model Unit template is used for this Model Unit? ___ Yes ___ No
All three stages of Backward Design are complete? ___ Yes ___ No		All three stages of Backward Design are complete? ___ Yes ___ No
Model Unit is aligned to Delaware content standards? ___ Yes ___ No		Model Unit is aligned to Delaware content standards? ___ Yes ___ No
Suggested resources are available? ___ Yes ___ No		Suggested resources are available? ___ Yes ___ No
At least one Design Principle (in addition to UDL/DI) is addressed ___ Yes ___ No		At least one Design Principle (in addition to UDL/DI) is addressed ___ Yes ___ No

<b>General Questions</b> <b>Designer needs answered:</b>		
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